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APPLICANTS

Harry Snyder, Warrington, PA;
 Richard Cullen, Downingtown, PA;
 Bruce E. Arnold JR., Frazer, PA;

** CONTINUING DATA *****

This appln claims benefit of 60/440,830 01/17/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 10	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	PA			
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

ADDRESS

Alexander J. Burke
 Intellectual Property Department
 5th Floor
 170 Wood Avenue South
 Iselin, NJ08830

TITLE

Executable application access management system

FILING FEE RECEIVED 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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